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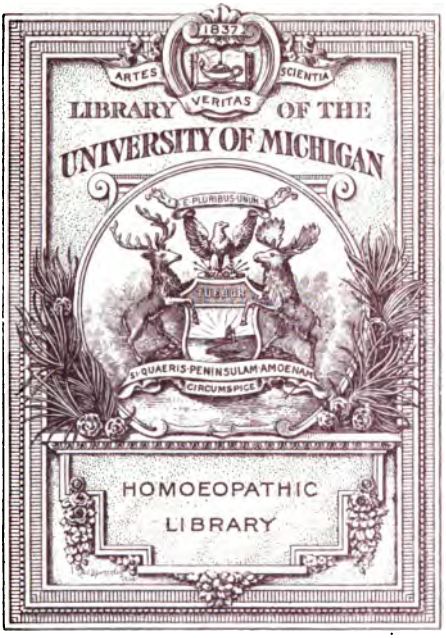
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WHOOPING-COUGH

CURED WITH

PERTUSSIN

WHOOPING-COUGH

CURED WITH

PERTUSSIN,

ITS

HOMŒOPATHIC NOSODE.

BY JOHN HENRY CLARKE, M.D.,

AUTHOR OF

"A DICTIONARY OF PRACTICAL MATERIA MEDICA,"

"HOMŒOPATHY EXPLAINED," ETC.

"There is truth in the Hahnemann method of curing like by like."

—Dr Roux, of the Pasteur Institute.

LONDON, ENGLAND:

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PREFACE.

I HAVE thought it desirable to put on record the experience described in this brochure for several reasons. In the first place, it is well that merit should be ascribed where merit is due—that the discoverer of the method of treating cases of disease with a remedy derived from the infectious principle of the disease itself, should have the credit of his discovery. This discovery was made by Hahnemann

150250

and his contemporary disciples, Pasteur, Koch, Behring and Roux, as the last named has had the candour to admit, have only trodden in Hahnemann's footsteps. "There is truth in the Hahnemann method of curing like by like," are the words of Dr Roux. Further, it should be known that in imitating Hahnemann, the later investigators have not improved on Hahnemann's methods. They have quite unnecessarily introduced vivisectional experiments, and they have adopted a dosage, and a method of subcutaneous injection, which are fraught with no little danger. This danger is admittedly

so great, that in the case of Dr Koch's treatment of tuberculosis the method has been abandoned by all but a very few practitioners. The homœopathic preparations are made in such a way that no cruelty to animals is involved, and no danger to patients is run. Disease-viruses are treated in the same way as serpent venoms, and the homœopathic preparations of both retain all the therapeutic properties of the original sources without any of their dangers.

This is the first of my reasons for putting my experience with the nosode of whooping-cough into print—in order to show that

to homœopathy and its founder is due the credit of the discovery that disease-viruses, like other poisons, may with safety be converted into remedies; and that the late incursion of old-school medicine into the fields of seropathy and vaccinations is simply—whether wittingly or not—an invasion of the homœopathic domain.

My second reason is, that homœopaths themselves have been all too slow to take advantage of the enormous power which this department of their art puts into their hands. The single example which I here present will be

sufficient for the thoughtful reader. Given one, all the rest may be known. I therefore urge on my homœopathic *confrères* to cultivate assiduously this new field, and not leave it to the so-called "orthodox" practitioners to exploit in their own barbarous fashion; or, still worse, to adopt their methods of barbarism in place of the scientific and enlightened method of Hahnemann.

Yet another purpose may be served by this book. It is necessary that the public should be made acquainted with the power and possibilities of homœopathic

therapeutics. Now, whooping-cough is a malady which is known to everybody, and of which the treatment can be intelligently observed by any mater-familias. It is a disease which is generally abandoned by old-school doctors as beyond the reach of remedies other than sedatives to calm the violence of the attacks of coughing. "Whatever time of the year the attack commences, it is bound to last till the following May," is a tradition which is not without some authoritative backing. This book may therefore serve in a certain degree as a popular educator. As a rule, the general public care little

or nothing about systems of treatment; but they do care about getting cured as expeditiously as possible. But, in order to secure the latter, the public will have to give some thought to the former. It is the public who are interested in having successful treatment, much more than it is the profession who are interested in administering it. The party in power in medical circles to-day is an obscurantist party, whose interest it is to keep students and public in the dark as to possible therapeutic reforms. I give here an instance of successful treatment by a method which is scouted in the orthodox schools

—except so far as it is presented under another name, in the crude methods of serum-injections and vaccinations. If the public wish to be treated in a civilised and scientific manner they must bestir themselves to understand something about methods of treatment, and combine to demand that their medical men shall learn the method which answers best. For the public should realise that it is they who are the masters of the situation, and that the medical profession are their servants. But servants of all classes need looking after; and if the public is neglectful in this particular, the public must not be

surprised if it has to pay the penalty.

I have said above that what I have here recorded of whooping-cough is only an example of what may be accomplished in the case of any disease of which there is an infective principle that may be converted into a homœopathic remedy. The late Dr Compton Burnett has shown to what potent curative use the nosode of Tubercle had been put, long before Koch's *Tuberculinum* appeared on the scene. I hope at no distant date to show, in the same way, what may be accomplished in homœo-

pathic hands with the various nosodes of cancer.

JOHN HENRY CLARKE.

8 Bolton Street,
Piccadilly, W.,
March 5, 1906.

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CHAPTER I.

WHAT IS A NOSODE?

THE first of modern scientists, outside the ranks of homœopathy, to make of a disease-virus a remedy for the disease which gave it origin, was Pasteur. Pasteur devised a method of treating persons bitten by mad dogs, with a preparation of hydrophobic virus, of which the virulence had been modified, and which he called — after an analogous method — a "vaccin."

Leaving on one side the question of the success or failure of this method, it has given rise to a large number of imitations, including the Serum treatment of diphtheria, the *Tuberculin* treatment of Koch, the *Tetanin* treatment of tetanus, and the Doyen treatment of cancer. All this should be very flattering to homœopaths. The method is peculiarly homœopathic —it is treating like by like. It is also the sincerest form of flattery—imitation—homœopathy having been half a century ahead of its modern imitators in using disease-viruses as remedies. Homœopathy has its hydrophobic virus, *Lyssin* or *Hydro-*

phobin; it has its virus of tuberculosis, *Tuberculin*, or, as Dr Burnett named the preparation he chiefly used, *Bacillinum;* it has its cancer-viruses, *Scirrhinum*, *Carcinosin*, *Epitheliomin*, *Sarcomatin*, and others; its virus of measles, *Morbillin*, and its virus of whooping-cough, *Pertussin.* Moreover, homœopathy has a general term which includes all these remedies derived from disease-viruses, the term "*Nosode.*" It is derived from the Greek word νόσος, which means "disease."

It is well that the public should become familiar with this term, because it means a source of help

in many forms of disease, acute and chronic, free from the grave dangers associated with the use of "serums," "vaccins," and the crude preparations of Koch and others. The nosodes of homœopathy are prepared by graduated attenuation, just like the virulent poisons — vegetable, animal, and mineral—which constitute a large part of the homœopathic Materia Medica. The knowledge of the curative powers of the nosodes should also draw attention to the fact that the homœopath has this very great advantage over his orthodox brother, that he knows how to prepare remedies for safe

use in all ages and conditions of life and disease without fear of injuring his patients. That is to say, he knows the power of infinitesimal attenuations of substances. The revelations in connection with radium and its emanation are opening the eyes of all intelligent lay persons to the fact that infinitesimal amounts may have enormous power over the human body; and in time the orthodox section of the medical profession may have its eyes opened also. But unhappily this section of the medical profession has fallen into such an inveterate habit of sneering at homœopathy *because* it recognises the power of the infinitesimal,

that it will take a much longer time for *it* to take in the significance of the truth than it will for the unacademic and presumably unprejudiced public.

At any rate, homœopaths have in their knowledge of the infinitesimals an enormous advantage over their orthodox rivals. It will be an unpardonable fault on their part if they do not make the most of it, and reap the reward of their success for the credit of Hahnemann and his school. I urge with all my power on homœopathic practitioners everywhere to work this rich lode of the homœopathic mine, and publish their results, that others

may know what is being done. Nosode homœopathy is the most fruitful of recent developments of this beautiful science and art of infinite possibilities.

CHAPTER II.

CASES CURED WITH PERTUSSIN.

WHOOPING-COUGH, as everyone knows, is an infectious disease. It is characterised at the outset by catarrhal symptoms which cannot be distinguished from an ordinary cold in the head. The catarrh is soon followed by a cough, at first irritating, but rapidly becoming spasmodic. When the disease is fully developed the fits of coughing are attended with symptoms

of suffocation, congested face, the fit terminating in the characteristic "whoop," which announces that the air has at last been admitted into the lungs. There is another feature of the cough which is no less characteristic—the expectoration of a clear, glairy, tenacious mucus. This mucus contains the virus of the infection, and it is from this that the *Pertussin* of homœopathy is prepared.

It is not my purpose now to describe whooping-cough and its dangers and possible consequences, which are numerous; but merely to give an account of a powerful remedy which may be used to meet

it. As my practice is a consulting and not a general one, I do not have many opportunities of treating cases of this disease, and my experience with the remedy is not very extensive. But it will be found to be sufficiently striking.

I may state here that I have used the remedy in one preparation only —the thirtieth centesimal potency.

Case I.

A maiden lady, verging on 60, of very gouty history, a governess by profession, continued her duties throughout the summer 1905 whilst her pupils were undergoing an attack of whooping-cough.

She herself contracted a violent spasmodic cough, which the allopathic family doctor pronounced to be "*not* whooping-cough." The family moved to their country house in Hertfordshire, and there Miss H. came under the care of Dr X. After due consultation with the mother of the children, Dr X. concurred, and found the cough "*not* whooping-cough." However, the lady was too ill to leave when the term of her service came to an end; but after a time she was thought well enough to be sent to the seaside, but the cough continued as before. In London she saw a homœopath, who thought

there couldn't be any whooping-cough in it after all that time. But the remedies he gave made no impression, and when I returned to town after the holidays she asked my opinion on the case. That was on September 28, after she had well-nigh coughed herself to pieces for three months. She looked completely broken down. Had violent fits of coughing; coughed till she retched; did not whoop, but the fits of coughing sometimes ended in a sob. I unhesitatingly pronounced the case to be one of whooping-cough, and set about to verify my diagnosis by the treatment.

The patient had had allopathic

cough remedies, and homœopathic cough remedies, she evidently now needed something fresh.

My prescription was—*Pertussin* 30, gl. iv. in powder of *Sacch. lact.* Mitte xxiv., one every 4 hours.

Oct. 3.—*Cough nearly gone: what there was left of it was quite easy and no trouble.* The patient was transformed. A thing to be noted was that since getting *Pertussin* she had had *very copious expectoration,* which gave great relief. Before this she could hardly get anything up at all.

The improvement went on steadily under the same remedy, and as an old patron of hers, Lady ——, wished

her to take charge of her children for a time, said children having all had whooping-cough, I allowed her to do so.

All went well till the end of the month, when an epidemic of influenza broke out in the house, and claimed my patient for one of its victims. This cleared up quickly under *Influenzinum* 30; but the influenza, as its evil habit is to wake up the germs of any old malady that may be lurking about, aggravated the cough, which started again with some violence, each cough ending in a sob, or gasp, or sigh.

Nov. 12.—*Pertuss.* 30, every four hours.

Nov. 23.—Expectoration very copious. Is very well in herself, but has a fearful cough, keeping her awake for one to two hours in the night.

The conditions being different, the nosode no longer had complete control of the case.

Here I may remark that the use of nosodes in no way excludes the use of other homœopathic remedies. Nosodes form a splendid addition to our armamentarium; but if we don't know how to supplement them with other remedies, we are just as badly off as if we didn't know how to supplement other remedies by the use of nosodes.

I now dropped the nosode and ordered *Corallium rubrum* 30, every four hours. The indication for this remedy was—"violent spasmodic cough with copious expectoration." Moreover, it was a nervous cough in a nervous patient. That was Nov. 23.

Dec. 7.—The cough altered in two days after beginning the medicine. No more fits of coughing. A little short cough during the day. Expectoration wearing off.

Dec. 13.—Cough keeps under. Very little expectoration. From this time on the cough gave no trouble.

CASE II.

Miss P., 20, an American, had been coughing for fourteen days, when I was sent for to see her at the Hyde Park Hotel on Oct. 3, 1905. The patient was a victim of infantile paralysis, and was very easily upset in her nerves. At the age of 10 she had had a cough like this, which went on indefinitely; and since that time the family always got into a panic when a cough started with her, because it was apt to keep on for a very long time. On the present occasion the whole family were detained in London by it, as they dared not risk

travelling, though they very much wished to continue their journey. Miss P. had been once successfully vaccinated, but the doctors tried to vaccinate her several times before they could get it to "take." She was subject to bad sick headaches, which she used to get at the monthly period. She was also subject to heavy colds in the head. Feet cold and dry. When she goes to bed, on first lying down she coughs, and when once she can get over this she sleeps well for a time. The cough is dry, and is brought on by motion.

I may say the family were allopaths for the most part, but they had heard of me from a nurse whom

they met in Paris. Their one sheet-anchor in these conditions was *Nepenthe*, given in one or two drop doses. This was the only thing that sufficed to keep the patient quiet till she could get sleep.

There was nothing very characteristic in this cough that I could then discover, and my first prescription was, *Stannum* 3, gr. v., every two hours.

Oct. 4.—No change. *Nepenthe* had to be used.

Now I had to go more deeply into the case. One new symptom I elicited was "pricking in the roof of the mouth on lying down." I was told when I first saw the patient,

that she had "never had whooping-cough." But when I came to cross-examine, I found that when she had the first attack of this cough, ten years before, the question of whether or not it was whooping-cough was canvassed, and all the pros and cons having been duly considered, it was decided in the negative. "She must have had whooping-cough many times, if it was," was the mother's remark. At any rate, I thought it was near enough to make a "like," as she had "strangling fits" with the cough, as if she would never get her breath. I prescribed *Pertuss.* 30, gl. x.; aq. ℥vi.; ʒii. every two hours.

Oct. 5.—Cough better; not so constant; strangling fits in bed not so bad. Less pricking in roof of mouth. Very little expectoration, but much nasal discharge, which is thick.

Repeat.

The patient was so much better that the parents thought they need not trouble me again.

On Oct. 8 I received a polite note from Col. P., the patient's father: "My daughter has improved so much since she has taken the second remedy, that Mrs P. has decided to leave on Tuesday."

I have no doubt whatever that this was a case of whooping-cough in the first instance, and that this

delicate girl had never had the strength to get completely over it, and had never had the "*similli-mum*"—*i.e.*, the exact homœopathic remedy—to help her until she got my *Pertussin.*

My next case has no connection with whooping-cough infection, but I give it to show that the Law of Similars is applicable in all respects to the use of nosodes as it is to the use of other homœopathic remedies. The nosode of a disease will not cure, or even help, all cases of the disease from which it is derived; but, on the other hand, it will cure cases of a great variety of com-

plaints which have no connection whatever with the original diseases, except that of *similarity in some marked characteristics.* Given this, the homœopathic physician does not trouble himself about origin—he trusts to his *Law.* It is the possession of Law which gives the homœopathist an enormous advantage over his old-school fellows, only he must not expect the Law to work of itself. It needs the use of observing faculties and brains in the application. All that the old-school practitioner needs is the teaching of his blind authority, and as this is an easier master to obey, the old-school doctor has a big

advantage here. But his patients do not reap the fruit of this advantage, and therefore it is to the interest of the patient-world to see that their medical advisers (who are also their medical servants) should make themselves masters of the Law of Cure, which is the Law of Similars, which is Homœopathy.

Here is the case :—

Case III.

A young unmarried lady of nervous temperament had a very bad cold, which left a cough that she could not get rid of. It was dry, irritating, and *made her feel sick at times.*

Now, one of the leading features of the whooping-cough attacks is the sickness they cause, or the desire to be sick. The similarity struck me as being close enough to whooping-cough to warrant me in prescribing the whooping-cough nosode, so I ordered *Pertussin* 30, to be taken night and morning. When next I saw the patient the cough had gone, and she informed me that the relief was very prompt.

The next three cases all occurred in the same family, and there was no question of the origin of the trouble—it was direct whooping-cough infection.

CASE IV.

On Oct. 24 I received a letter from a lady in the country, Mrs C., saying that her two boys, John, aged 9, and William, aged 6, had had bad colds, and had been coughing for a fortnight. They had been with children who had since developed whooping-cough. She described the cough, and asked if she should bring them up for me to see if it was whooping-cough in their case. I told her I had no doubt it was whooping-cough, and she need not bring them.

William, the younger of the boys, was the most seriously affected.

On Sept. 18, 1905, he had a cold. On Sept. 29 he was in contact with children who had coughs which proved to be whooping-cough. About ten days later his cough began, and at the time his mother wrote to me (October 24) it was very troublesome, and made him sick.

℞ *Pertussin* 30, glob. x.; aq. ℥vi.; a dessertspoonful every two hours.

October 29.—The report is that he has now begun to "whoop" well, and is sometimes a little sick.

Repeat.

November 3. — "The cough

sounds looser; he whoops, and is often slightly sick. Is well in other ways."

Repeat.

November 9.—"He coughs less; is less sick; still whoops; grinds his teeth less."

Repeat.

November 14.—"Still improving."

Repeat, night and morning only.

November 24.—"Seldom coughs; whoops less; is no longer sick; is very well in himself; eats heartily."

Repeat.

December 5.—On this date new symptoms were reported, but the cough was steadily passing away.

This is the account I received: "Cough better; whoops a little. Seems to have indigestion. Stools yellow; sometimes three a day, loose and offensive. Pain in abdomen at times. Appetite good. Irritable, but doesn't seem poorly."

A new situation having developed, the treatment had to be reconsidered. *Pertussin* had here completely broken the attack—had, indeed, practically cured the whooping-cough. A remedy was now required which should meet the symptoms of the internal derangement, and also, if possible, the cough symptoms as well. The remedy that I selected for this was

Podophyllum 30, three doses to go over a week.

December 28.—The report received is—"Coughs only once or twice in the day. He does not whoop at all, and seems very well."

In the next case, the remedy got to work in a less advanced stage of the disease, and its action was more prompt; in fact, it aborted the attack.

Case V.

John C., aged 9, like his brother, caught cold, Sept. 18, 1905, and on Sept. 29 came in contact with whooping-cough infection, and

about the middle of October developed a cough.

October 24. — "Has a hard, throaty cough."

℞ *Pertussin* 30, gl. x.; aq. ℥vi.; ʒii. every two hours.

October 29.—"Still coughs, but doesn't whoop yet."

Repeat.

November 3.—"Hardly coughs at all; hasn't whooped once; seems very well."

Repeat.

November 14.—"Seldom coughs; seems well."

Repeat, night and morning only.

December 3.—"Cough better; is keeping better."

Repeat, at longer intervals.

December 28.—"Is very well. Coughs a little, once in the early morning, but he generally did that when well."

In this case the remedy rapidly wiped out the disease, without allowing it to develop enough to inconvenience the patient or affect his health in any way. Later on I shall give another case in which the same thing happened; but I must now pass on to the case of the mother of these two boys.

Case VI.

Mrs C., dark, rather small, with a phthisical history in the family,

and herself suffering from *fistula in ano*, but otherwise well, wrote me in Oct. 29, 1905, that she herself had a troublesome cough, "not very tight, but leaving a *stinging sensation in the chest.* Not feeling well." Considering that she was breathing an atmosphere charged with whooping-cough germs, I ordered *Pertussin* 30, t. d.

Nov. 3.—"*My cough does not hurt now*, but is most trying, often keeping me awake the first part of the night. Sometimes it is spasmodic, sometimes continuous. Am not deaf *yet*" [she had suffered previously from deafness, which I had cured], "but inside the right

ear is so sore I dare not wash it properly. My head often aches, and everything is a great trouble. *Cough often causes the urine to pass involuntarily.*"

The remedy had done something in this case—it had eased the pain in the chest which the cough previously caused; but the case was a more complicated one than the others, and the remedy did not correspond to it in its entirety. The Law of Similars is inexorable—as soon as a remedy has changed a case out of its "similitude," it will do no more for the patient; and if there is no similitude between remedy and case, the

remedy will do nothing. Happily, in homœopathy, when a remedy has missed its aim, it is not likely to do any harm. There is no residuum of material drug for the system to get rid of.

Pertussin having done all that it was capable of for this patient, the question now was, what to give next. The rule in homœopathy is to find in the remedy to be selected something to correspond to the most striking and peculiar symptom or symptoms manifested in the case to be treated. Now the most troublesome as well as the most peculiar symptom in this case was the involuntary expulsion of urine with each

fit of coughing. There are many remedies which have produced this symptom, but there are only a few which have it as a marked and prominent feature of their symptom-list. In my experience, the remedy of which it is most characteristic is *Causticum*, and as Causticum corresponded to other features of the case, this remedy was ordered, with 30th potency, to be taken every two hours.

November 9.—"Much better. Cough not gone, but very slight and quite loose. No pain, but *much less trouble with the bladder.*"

I ordered the remedy to be continued; but as there was an

epidemic of influenza in the patient's neighbourhood, I ordered in addition *Influenzinum* 30, one dose at bedtime.

November 14.—"Cough not so well; more like it was at first, only it does not hurt."

Again it was necessary to make a change. In the search for the homœopathic remedy it is often necessary to go back over a case and find points of likeness in symptoms which have been present formerly. When first prescribing for this patient's cough, my choice was divided between *Pertussin* and *Apis*, the indication for *Apis* being the *stinging pains* in the

chest, caused by the cough. *Pertussin* removed that, but it did little else, and the fact of this symptom having been present remained an indication for *Apis.* I therefore ordered *Apis* in the 30th potency, and this rapidly cleared up the case. There was no further trouble with the cough.

I have given this case in some little detail in order to show that the nosodes cannot be used in a lazy, penny-in-the-slot method, with any hope of great success. Nosodes are an enormous help, and the knowledge of their power and use saves a very great amount of labour and trouble in symptom-matching;

but the Law of Similars demands the most devoted service of its adherents, and refuses to give its best results to anything like slip-shod practice. Nosodes are subject to the Law, like any other homœopathic remedy, and it is necessary for the prescriber to know when and how to supplement their action at any moment. Labour-saving devices and generalisations are of much value to the homœopath, and are eagerly welcomed; but it must never be forgotten that "eternal vigilance" alone is the price of success in homœopathy. This is the real reason why there are not more homœopathic doctors. It is so much

easier for teachers of established medicine to denounce homœopathy *ex cathedra* than it is to master it; and it is so much easier for their students to accept this judgment as sufficient, than to investigate the matter for themselves, that there is no immediate likelihood of a great accession to our numbers.

I will now relate the last of my cases.

CASE VII.

Master R., aged 6, a very delicate, nervous boy, with a bad family history behind him, including lupus and cancer in his paternal grandparents, was under me for constitutional treatment,

and was brought to me periodically when each prescribed course of treatment was finished. His mother brought him in the usual way on December 18, 1905. This time there was something new. He had had what his mother described as a "fearful cough and cold" for a week. He had also had headache, and had vomited. There was much expectoration with the cough, and I found wheezing all over the boy's chest. He had a suffused and puffy look about the face.

I asked the mother if there had been any cases of whooping-cough in her neighbourhood. She did not know of any; but she had her

suspicions, and she had always had a dread of whooping-cough for her boy, as her husband's only brother had died of it. I told her I believed it was the beginning of whooping-cough, but I did not think she need be at all alarmed. I told her to keep the boy quiet. He was to have no fatiguing walks, but he might walk out in the forenoon when the weather was fine.

℞ *Pertussin* 30, gl. x. ; aq. ℥viii.; a dessertspoonful every four hours.

December 29.—Eleven days later the boy was brought to me again. There was a great change in his condition, and this is what had happened. The characteristic

"whoop" appeared after a few days, generally in the early morning. He retched twice in the street after he had had the medicine two days, and he brought up a great quantity of glue-like expectoration. The attacks in the street were so characteristic, that careful mothers of families who happened to be in the street at the same time prudently passed by on the other side, to avoid carrying the infection to their own children.

The whooping only lasted a day or two; the sickness only occurred a few times. The expectoration had ceased three days before his second visit, and now he hardly

coughed at all. I examined his chest, and found that the signs of catarrh had completely cleared up.

Repeat, night and morning only.

In this case the remedy had acted by developing at once the crisis of the disease, and then wiping it out. The same thing happened in Case IV., but the cure was longer in being effected, as it had been longer in developing. In Case VII. the cure was brought about in a little over a week.

The patient was able to return to school when the holidays came to an end.

CHAPTER III.

CONCLUSION.—SOME LESSONS FROM THE CASES.

IN relating the above cases we have not exhausted the interest they contain. There are still some useful lessons in practice to be deduced from the observations.

There are several ways in which remedies may be introduced into the homœopathic Materia Medica. The classical way is, of course, Hahnemann's original method of testings or "provings" on the

healthy. This he soon found it possible to supplement, by observations made on patients under the influence of a remedy. A remedy given on certain indications will often remove symptoms which were not before known to be part of its symptom-list. The observer who watches the case notes this effect, and he may prescribe the remedy to another patient presenting some of these new symptoms. If in the second case these symptoms are relieved or removed, he is entitled to regard them as part of the drug's symptom-list or "pathogenesis," as it is technically called. Again, when a remedy is given to a patient it may, in

addition to relieving him, excite other symptoms which are no part of his disease, and are not known to be part of the drug's causation. These symptoms should be noted and tested in the same way, and if confirmed in practice, they also may be added to the drug's symptom-list.

In making use of nosodes, the physician may proceed in exactly the same way as with remedies derived from plants or minerals. The first nosode used in homœopathy was so introduced. Hahnemann himself proved *Psoricum*, and his proving has been the basis of its use in homœopathy ever since. But this has not been

the case with all the nosodes, and it was not the case with *Pertussin.*

It is self-evident, that every case of an infectious disease is, in effect, a proving of the infective principle. This being evident, it follows that a symptom-list compiled from the signs or symptoms of a large number of cases of any infectious disease supplies a solid basis on which the homœopathic physician may prescribe its nosode. It also follows that the nosode must be more or less homœopathic to every case of the disease.

But the homœopath can never lose sight of the necessity of in-

dividualising his cases. Individual cases of the same disease differ enormously, and it not infrequently happens that some consideration apart from the ordinary manifestation of the infection at work will indicate the remedy. The homœopath must be prepared to meet this, and, therefore, can never be a slave to routine.

Moreover, although the symptoms of a disease form a picture of the curative powers of the nosode, it is a great advantage to the homœopath to have a proving of the remedy as well. Provings are made with homœopathic attenuations of the virus on healthy persons.

These preparations will not produce the actual disease, and they will not endanger the health of those who test them; but they will produce symptoms, and these symptoms are valuable guides to their use in any morbid condition, whether part of the original disease or not. Provings of this kind have been mostly made by homœopathic physicians on themselves, from the time of Hahnemann downwards.

Pertussin still remains to be tested in this way, or "proved"; but in the meantime, the evident symptoms of whooping-cough, and the history and diagnosis of whoop-

ing-cough infection may be taken as the indications for its use, as was done in my cases. In the course of these cases everal symptoms of a distinctive character were removed, which may be tested in future cases, and, if confirmed, may be looked upon as leading indications for the use of the nosode. These symptoms are :—

(1) "Itching of the palate on lying down at night."

(2) "Stinging pain in or on the chest, with cough."

(3) "Sickness, or feeling of sickness, at the end of cough."

(4) "Sobbing or sighing at end of cough."

(5) "Strangling sensation with cough on waking."

These symptoms I commend to the notice of homœopathic physicians, and ask them to observe whether their experience confirms them or otherwise.

A further important point in homœopathic practice is to observe the RELATIONSHIPS OF REMEDIES. It is not often that a single remedy will cure a case of disease. Sometimes it will—even a single dose of the remedy. But more often there will come a time when the remedy must be changed and another given. It is then of great importance to

know which remedy to select next. It will often happen that the indication for the next remedy is so clear that there is no room to doubt which to select. But that is not always the case: several remedies may be apparently equally well indicated. It is then very useful to know if experience has proved that certain of these agree well with, and complement the action of the one which has done well but ceased to benefit. For some remedies agree well with others; some arrest their action or over-action, or, in other words, act as antidotes. If an antidote is required, it is valuable to have a list of the remedies which

have proved antidotal to the remedy given. If a complementary remedy is required, it is useful to have a list of remedies which have been found by experience to follow the remedy well, and carry on its work.

Can we, then, gain any information on these heads from the experience of my seven cases? I think we may infer that *Pertussin* is followed well by *Corallium*, *Causticum*, and *Podophyllum*. At any rate, these remedies acted well after *Pertussin* had given marked relief to the patients.

On the other hand, I think it may be inferred that *Influenzinum* is in some degree inimical to the

action of *Pertussin.* An attack of influenza brought back whooping-cough symptoms in one case when these had been nearly cured. This attack of influenza was cured with *Influenzinum*, and after that *Pertussin* could do no more for the case.

With these observations, I place this small contribution to an immense subject before my readers. With all the earnestness which I can command, I entreat my homœopathic *confrères* to give to the use of the nosodes the very deepest and most careful attention.

In hoc signo vincimus.

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